DP Code/Title:

State of Washington Decision Package of Social and Houlth Sorvices

Department of Social and Health Services

M1-94 Mandatory Workload Adjustments

Program Level - 030 Mental Health

Budget Period: 2003-05 Version: 11 2003-05 Agency Request Budget

Recommendation Summary Text:

This request would fund workload increases for Child Study and Treatment Center (CSTC), Western State Hospital (WSH) and Eastern State Hospital (ESH). These staff are needed to meet the needs of growing populations of patients with developmental disabilities at CSTC and WSH, increases in the number of high needs inpatient children at CSTC, and an increased forensic census at ESH.

Fiscal Detail:

Operating Expenditures	<u>FY 1</u>	<u>FY 2</u>	Total
Program 030			
001-1 General Fund - Basic Account-State	2,119,000	2,070,000	4,189,000
001-7 General Fund - Basic Account-Private/Local	347,000	344,000	691,000
001-C General Fund - Basic Account-DSHS Medicaid Federa	494,000	463,000	957,000
Total Cost	2,960,000	2,877,000	5,837,000
Staffing	<u>FY 1</u>	<u>FY 2</u>	Annual Avg
Program 030 FTEs	50.2	50.2	50.2

Package Description:

ESH is currently funded and staffed for 83 forensic beds. However, their forensic census for the past year has averaged 92 beds. This request will provide the necessary funding and FTEs (9.0) to support 90 beds or 3 wards.

CSTC has experienced an increase in two patient populations, both of which require increased staffing. The number of developmentally disabled (DD) patients nearly doubled in Fiscal Year 2001 from the previous year. Individualized treatment modalities and safety measures for DD patients can only be realized by increases in staffing levels. In addition, CSTC has experienced an increase in the numbers of adolescent patients with special needs. These children can be (and many are) spontaneously violent; the majority have histories of inappropriate sexual behavior; some are very psychotic and cannot attend school. Because some patients must be maintained in the cottage, staff are split between school and cottage; staffing needs are increased. This request includes 3.5 FTEs to meet the needs of DD patients and 3.0 FTEs to increase staffing for high needs inpatient children.

The Habilitative Mental Health Treatment Program (HMHTP) (Phase 3) within WSH serves patients who, in addition to the behavioral or mental conditions which led to their hospitalization, are also developmentally disabled. The program was developed and implemented as a result of a federal lawsuit (Allen Et, AL. vs. Western State Hospital) and became operational in April 2000. Initially, the program was developed to serve 24 patients with 59.0 funded FTEs. Currently, the Habilitative Program is serving 47 patients and is utilizing approximately 89.0 FTEs. The program was intended to be housed in a unit that is "distinct and physically separate from units serving persons with acute and chronic mental illness." Because of the growth in this program, portions of the population are housed on three wards. In two wards, the DD patients are co-located with patients with both acute and chronic mental health patients. This request would fund the 30 FTEs necessary to the HMHTP operations and allow the program to be separately housed in two co-located wards.

A series of serious staff injuries by assaults in 1999 highlighted a need to improve safety at WSH for staff, patients, and visitors by providing staff with personal alarm devices. Based on an internal team evaluation, the Security Escort System was purchased for limited usage. The WSH Communication Center was chosen to monitor and manage the system.

The system has worked very well to provide greater safety for staff, patients, and visitors at WSH in those units that have the system. Response times have diminished significantly which has resulted in less staff injuries. The system was installed in

PLACEHOLDER

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the wards temporarily occupied by the Forensic Units and has been installed in the new Forensic building. The ability to fully utilize this system will greatly enhance the safety of staff, patients, and WSH visitors. Monitoring and managing the currently installed system will take more staff than the Communication Center has available. Communications Center staffing levels are the same now as they were in 1986. During that time the number of analog phones for which they are responsible has more than doubled; pagers have increased by almost seven-fold, and radios by 1,000 percent; the staff have become the primary monitors of the fire alarm system, and now operate and monitor the personal alarm system. An additional 3.5 FTEs are requested to cover the increased workload. This will provide one additional operator on an around-the-clock basis.

Narrative Justification and Impact Statement

How contributes to strategic plan:

Providing adequate staffing contributes to the goal of ensuring quality, cost effective medical and clinical care. This promotes the health and safety of both clients and staff.

Performance Measure Detail

Program: 030

Goal: 02C Enhance safety for consumers, employees and the public

Incremental Changes FY 1 **FY 2**

Incremental Changes

No measures submitted for package

Goal: 04C Ensure public mental health works for most seriously,

FY 1

FY 2

chronically, mentally ill No measures submitted for package

Goal: 11C Ensure infrasturcture of state hospitals provides a safe and secure environment

FY 1

Incremental Changes FY 2

No measures submitted for package

Reason for change:

The additional staff will allow for continuation of current services.

Impact on clients and services:

Potential risk to both patients and staff from patient violence would be reduced. This would help protect the health and safety of clients. This would allow staff to more fully concentrate on providing clinical and the habilitative and rehabilitative services the clients need.

Impact on other state programs:

More positive outcomes for these patient populations could have positive impacts for Juvenile Rehabilitation Administration, Division of Developmental Disabilities, local law enforcement, and community mental health providers.

Relationship to capital budget:

None

Required changes to existing RCW, WAC, contract, or plan:

None

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Alternatives explored by agency:

This request is to continue current operations. No alternatives were considered.

Budget impacts in future biennia:

Staffing levels and funding would carry forward into future biennia.

Distinction between one-time and ongoing costs:

All costs in this decision package are ongoing.

Effects of non-funding:

Operations would not fully meet the clinical, safety, and habilitative or rehabilitative needs of clients, and would put staff in jeopardy of injury due to patient violence. There are no FTEs available that can be moved from other areas within the hospitals.

Expenditure Calculations and Assumptions:

See attachment - MHD M1-94 Mandatory Workload Adjustments.xls

Object D	<u>etail</u>		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Prograi	n 030 Objects				
Α	Salaries And Wages		2,164,000	2,164,000	4,328,000
В	Employee Benefits		611,000	611,000	1,222,000
E	Goods And Services		170,000	87,000	257,000
G	Travel		6,000	6,000	12,000
Т	Intra-Agency Reimbursements		9,000	9,000	18,000
		Total Objects	2,960,000	2,877,000	5,837,000

State of Washington Decision Package

PLACEHOLDER

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Budget Period	: 2003-05 Version:	11 2003-05 Agency Request Bud	get		
DSHS Sour	ce Code Detail				
Program 030			<u>FY 1</u>	<u>FY 2</u>	Total
Fund 001-1,	General Fund - Basic /	Account-State			
<u>Sources</u>	<u>Title</u>				
0011	General Fund State		2,119,000	2,070,000	4,189,000
		Total for Fund 001-1	2,119,000	2,070,000	4,189,000
Fund 001-7,	General Fund - Basic	Account-Private/Local			
<u>Sources</u>	<u>Title</u>				
5417	Contributions & Grants		347,000	344,000	691,000
		Total for Fund 001-7	347,000	344,000	691,000
Fund 001-C	, General Fund - Basic	Account-DSHS Medicaid Federa			
Sources	<u>Title</u>				
19TA	Title XIX Assistance (F	MAP)	494,000	463,000	957,000
		Total for Fund 001-C	494,000	463,000	957,000
		Total Program 030	2,960,000	2,877,000	5,837,000